

PACIFIC DISASTER MANAGEMENT INFORMATION NETWORK (PDMIN)

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ASIA-PACIFIC DISEASE OUTBREAK /SURVEILLANCE REPORT

Week of Apr 26, 2004

AUSTRALIA

Record Numbers of Ross River Virus Cases in Perth, Australia

Western Australian health authorities are alarmed at record numbers of cases of Ross River virus infection in Perth so far in 2004. Over 1400 people have been infected, prompting them to consider more aggressive health campaigns. In the metropolitan area, 466 cases have been reported, confirming the theory that Ross River virus disease has become more urbanized, with domestic mosquitoes are spreading the virus. The number of cases of Ross River virus has now surpassed Western Australia's big outbreak in 1995-96, when about 1400 people were infected. By 23 April 2004 over 750 cases had been reported in the southwest, many from Busselton and Capel. Case numbers are rising in the Kimberley, Pilbara, and Central Wheatbelt. Infection rates had dropped off in southern areas where the nights were getting cold and mosquitoes were less active.

Source:

- · The West Australian Online, Apr 26, 2004, http://www.thewest.com.au/20040427/news/general/tw-news-general-home-sto123952.html
- · Promed Mail, Apr 27, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:9697048495978160699::NO::F2400 P1001 BACK PAGE,F2400 P1001 PUB MAIL ID:1000.25 240

BANGLADESH

Diarrhea Cases on the Rise in Bangladesh

The diarrhea situation in the city is taking an alarming turn, with hospitals and clinics struggling to cope with the increasing number of patients. Around 400 patients a day were admitted in the last 2 weeks to the International Center for Diarrhea Disease Research, Bangladesh (ICDDR,B), the sole hospital for treatment of waterborne diseases at Mohakhali. About 70 to 80 per cent of the patients coming from different areas of the city were children. ICDDR,B treated around 8000 diarrhea patients in March 2004. In February 2004, the number was 4881 and in January 2004 it was 5857. Outbreaks of diarrhea are common this time of year and the situation worsens in May and June. Besides the hot spell, doctors attribute the severity to the scarcity of safe drinking water and intake of stale or rotten food.

Source:

- $\cdot \textit{ The Daily Star, Bangladesh, Apr 28, 2004, } \underline{\text{http://www.thedailystar.net/2004/04/28/d404282501131.htm}}$
- · Promed Mail, Apr 30, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE,F2400 P1001 PUB MAIL ID:1000,25274

Diarrhea Kills One Person, Sickens 653 in Barisal, Bangladesh

One person has died and a total of 653 patients have been affected by diarrhea in Barisal. Each day about 20-25 diarrhea patients are admitted to the hospital. At present there are 173 patients, most of them are children and elderly people. The civil surgeon office sources indicate that there have been 400 diarrhea patients in the entire district. In addition, 253 more patients are being treated in the Sadar Hospital and the Sher-e-Bangla Medical College Hospital (SBMCH). There is shortage of the Electro-K medicine, which is essential for treatment of children.

Source:

- · The Daily Star, Bangladesh, Apr 20, 2004, http://www.thedailystar.net/2004/04/20/d40420070580.htm
- · Promed Mail, Apr 27, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE.F2400 P1001 PUB MAIL ID:1000,25250

CHINA

China Confirms SARS Infection -- Summary of Cases to Date

Chinese authorities have today reported test results confirming that the 53-year-old woman who died in Anhui Province on 19 April was infected with the SARS coronavirus. The woman, a medical doctor, was the mother of a 26-year-old postgraduate student who had been conducting research at the National Institute of Virology in Beijing. The student remains hospitalized in Anhui. Since the first case was reported on 22 April, Chinese authorities have confirmed a diagnosis of SARS in five persons. Testing continues on another four who have SARS-like symptoms and a history of close contact with a known case. Since 22 April, the seven patients in Beijing are now being treated in isolation in a single facility, Ditan Hospital. Investigation of the outbreak source is presently focused on lapses in biosafety procedures at the National Institute of Virology. The institute was closed on 23 April and its staff were placed in isolation.

Source:

· WHO Website, Apr 30, 2004, http://www.who.int/csr/don/2004_04_30/en/

GUAM

Leptospirosis in Military Personnel, Guam

The Naval Hospital has determined that the 3 Air Force members displaying symptoms of leptospirosis in March 2004 likely contracted the disease near Sigua Falls. The hospital had 1 confirmed case and 2 suspected cases -- 2 cases had been hiking in the Sigua Falls area and were caught in a rainstorm, wading in the river and noted run-off water from the land to the river, and the other case went swimming in the falls area. All 3 had cuts on their hands or legs from hiking. Leptospirosis is found in water contaminated by waste from wild animals carrying the bacteria. About 2 cases are reported each year. Symptoms are similar to influenza and mild cases are often mistaken for the other illness. Symptoms can include fever, headaches, chills, muscle aches, vomiting, stomach pain, jaundice, red eye, diarrhea or rash. Untreated, patients can develop kidney damage, meningitis, liver failure, respiratory problems or death. Source:

- · Pacific Daily News, Apr 24, 2004, http://www.guampdn.com/news/stories/20040424/localnews/284138.html
- · Promed Mail, Apr 27, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK_PAGE,F2400 P1001 PUB MAIL ID:1000,25251

HONG KONG

Case of Hand, Foot and Mouth Disease in Hong Kong

The Department of Health confirmed a case of Enterovirus-71 (EV-71) infection in a 2-year old

boy and urged the public to guard against the disease. The boy became ill on 10 April 2004 with fever and rash over his hands and mouth. He has since recovered. Cumulative Total in 2004: 3 imported and 0 local cases. The total number of cases in previous years: 60 in 1998, 22 in 1999, 6 in 2000, 30 in 2001, 5 in 2002, 1 in 2003. Preventive measures include: washing hands; maintain good ventilation; and cleaning contaminated toys or appliances. Hand, foot and mouth disease (HFMD) is a generally benign form of enterovirus 71 (EV-71) infection which produces superficial rashes on the mouth and extremities of the limbs of children. In a small proportion of cases there may be severe neurological sequelae. It is rare in Europe, North America, and Australasia, but since 1997 there has been a significant increase in the Asia-Pacific region.

Source:

- · Hong Kong Department of Health, Press Release, Apr 26, 2004, http://www.info.gov.hk/dh/new/index.htm
- · Promed Mail, Apr 27, 2004,
- http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE,F2400 P1001 PUB MAIL ID:1000,25252

INDIA

Tests Indicate Cholera Outbreak in Calcutta, India

Tests conducted by the National Institute of Cholera and Enteric Diseases have indicate that nearly all the patients admitted to the Infectious Diseases (ID) Hospital at Beleghata following the gastroenteritis outbreak in parts of Calcutta were victims of cholera. As many as 99 per cent of the over 1500 patients admitted between 5 and 17 Apr 2004 were suffering from diarrhea caused by _Vibrio cholerae_ O1 bacteria. Hundreds of residents in the slum areas of Narkeldanga, Rajabazar, Tangra, and Beniapukur were rushed to the hospital with symptoms of severe dehydration and stomach upset following consumption of contaminated piped water. The route of infection for both gastroenteritis and cholera is the fecal-oral route. Though the symptoms and treatment for gastroenteritis and cholera are the same, cholera could be fatal if medication is not provided.

Source:

- · The Telegraph, Apr 25, 2004, http://www.telegraphindia.com/1040425/asp/calcutta/story_3170349.asp
- · Promed Mail, Apr 28, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE,F2400 P1001 PUB MAIL ID:1000,25256

MALAYSIA

Signs of Salmonella in Orang Asli Children

Tests have shown that one of the 4 orang asli children (the orang asli are the indigenous minority peoples of Peninsular Malaysia) who died under mysterious circumstances had salmonella infection, which is a common cause of food poisoning. Results from the other affected children are pending from the Institute of Medical Research. The children could have suffered from amoebic dysentery, cholera or typhoid. The four orang asli children died between 9 and 12 April 2004. A lack of hygiene and drinking contaminated water were believed to have caused the deaths. Water samples taken from the area showed the presence of bacteria and parasites. It is unclear at this time whether the cases are related in etiology and whether the case number represents an upswing in the endemic rate of gastroenteritis and diarrhea illnesses.

Source:

- $\cdot \textit{The Star Online, Malaysia, Apr 27, 2004,} \\ \underline{\text{http://202.186.86.35/news/story.asp?file=/2004/4/27/nation/7854005\&newspage=Searched} \\ \underline{\text{News/story.asp?file=/2004/4/27/nation/7854005\&newspage=Searched} \\ \underline{\text{News/story.asp.} \\ \underline{\text{News/story.as$
- · Promed Mail, Apr 27, 2004,
- http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE,F2400 P1001 PUB MAIL ID:1000,25248

NEPAL

Diarrhea Epidemic Affects 100 People in Rautahat

The diarrhea epidemic in Bagahi village of Rautahat which broke out on 23 April 2004 has affected over 100 people. Contaminated food and water have been blamed as well as rising temperatures. The VDC health post had repeatedly informed the District Public Health Office about shortage of necessary medicines to counter the epidemic, but action has not yet been taken.

Source:

- · Nepal News, Apr 27, 2004, http://www.nepalnews.com.np/archive/2004/apr/arc_apr04_27.htm
- · Promed Mail, Apr 30, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:424240::NO::F2400 P1001 BACK PAGE.F2400 P1001 PUB MAIL ID:1000,25274

Other World News

UNITED STATES OF AMERICA

Hawaii Leptospirosis Rate Increasing

The Hawaii State Department of Health (DOH) is cautioning residents and visitors to protect themselves against leptospirosis. There has been an increase in the number of cases reported to DOH - 21 cases this year, compared to only four for the same period last year. Historically two-thirds of Hawaii's leptospirosis cases occur during the second half of the year, during warmer weather. Leptospirosis is a bacterial disease carried by rats and mice, although dogs, pigs, cattle and horses can also become infected. It is transmitted to humans by exposure to fresh water contaminated with urine from infected animals. Infection can occur when contaminated water enters the body through the mouth, nose, eyes or open wounds. Individuals who develop flu-like symptoms and have had fresh water, mud or animal exposure, should immediately seek medical attention.

Source:

· Hawaii Department of Health Press release, Apr 27, 2004, http://www.hawaii.gov/health/about/press/2004/04-30lepto.html

WORLD

Global Measles Deaths Drop Dramatically

The World Health Organization (WHO) and the United Nation's Children's Fund (UNICEF) announced a global reduction of 30% in deaths from measles between 1999 and 2002, demonstrating that countries can achieve the UN goal of cutting measles deaths in half by the end of 2005. The news comes as countries take part in Vaccination Week in the Americas (April 24-30). During the week, millions of people are being immunized against several vaccine-preventable diseases. Despite the availability of a safe, effective, inexpensive vaccine for over 40 years, measles remains the leading vaccine-preventable killer of children. In 1999, some 869 000 people died of measles. In 2002, measles killed an estimated 610 000 people, a decline of 30%. The strategy is based on achieving at least 80% routine measles immunization coverage in every district, and ensuring that all children get a second opportunity for measles immunization.

Source:

· WHO Website, Apr 27, 2004, http://www.who.int/mediacentre/releases/2004/pr30/en/